

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail**

**Mail Stop ISSUE FEE**  
**Commissioner for Patents**  
**P.O. Box 1450**  
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**or Fax (703) 746-4000**

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless specified below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

20786

7590

03/05/2004

**KING & SPALDING**  
**191 PEACHTREE STREET, N.E.**  
**ATLANTA, GA 30303-1763**

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

<b>Stephanie D. Adams</b>	(Depositor's name)
<i>[Signature]</i>	(Signature)
6/4/2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/970,089	10/02/2001	Susheng Wang	EMU3020 US 18085.105310	9533

TITLE OF INVENTION: TRIPTOLIDE ANALOGS FOR THE TREATMENT OF AUTOIMMUNE AND INFLAMMATORY DISORDERS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$300	\$965	06/07/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
KIFLE, BRUCK	1624	514-475000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. **Sherry M. Knowles, Esq.**
2. **King & Spalding, LLP**
3. \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

**Emory University 1380 Oxford, Rd., Atlanta, GA**

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee
- ☒ Advance Order - # of Copies 15

4b. Payment of Fee(s):

- ☒ A check in the amount of the fee(s) is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☒ The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 11-0980 (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature) \_\_\_\_\_ (Date) 6/4/04

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

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06/09/2004 AWONDAF2 00000176 09970089

01 FC:2501 665.00 OP  
 02 FC:1504 300.00 OP  
 03 FC:8001 45.00 OP

TRANSMIT THIS FORM WITH FEE(S)



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No. : 09/970,089  
Applicant : Dennis C. Liotta *et al.*  
Filed : October 2, 2001  
T.C./A.U. : 1624  
Examiner : Bruck Kifle

Confirmation No. 9533

Docket No. : 18085.105310  
Customer No. : 20786

Mail Stop Issue Fee  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

June 4, 2004

ISSUE FEE TRANSMITTAL

Sir:

Applicants submit herewith the PTOL-85B Issue Fee Transmittal Form. Applicants enclose payment of the issue fee. Applicants believe that the issue fee is \$965.00 and the advanced order fee for fifteen extra copies of the issued patent is \$45.00 (15 x \$3.00). Enclose a check for \$1,010.00. The Commissioner is authorized to charge any deficiency or credit any overpayment to Deposit Account No. 11-0980.

Respectfully submitted,

Sherry M. Knowles, Esq.  
Registration No. 33,052

KING & SPALDING  
191 Peachtree Street  
Atlanta, Georgia 30303  
404-572-4720 (Telephone)  
404-572-5145 (Facsimile)

CERTIFICATE OF MAILING (37 CFR 1.8a)

I hereby certify that this Transmittal of Issue Fee, Amendment and any paper referred to as being attached or enclosed, is being deposited with the United States Postal Service on the date shown below with sufficient postage for first-class mail in an envelope addressed to the Commissioner for Patents, Box Issue Fee, P.O. Box 1450, Alexandria, VA 22313-1450.

6/4/2004

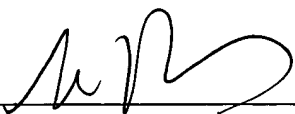
Date

Stephanie D. Adams



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Stephanie D. Adams

Date: June 4, 2004